

**APPLICATION DATA SHEET****Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?: Yes

Computer Readable Form (CRF)? No

Number of copies of CRF::

Title :: HUMAN CYCLIN-DEPENDENT KINASE  
(*hPNQALRE*)

Attorney Docket Number:: 59516-57 / PP-01524.103

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 4

Small Entity?: No

Petition included?: No

Petition Type::

Licensed U.S. Gov't Agency:: No

Contract or Grant No::

Secrecy Order in Parent Appl.?: No

## First Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Christoph
Middle Name::	
Family Name::	Reinhard
Name Suffix::	
City of Residence::	Alameda
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	c/o Chiron Corporation, P.O. Box 8097
City of mailing address::	Emeryville
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	94662-8097

## Correspondence Information

Correspondence Customer Number::	27476
Name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Phone number::	
Fax Number:	

E-Mail address::

### Representative Information

Representative Customer Number::		<b>22504</b>
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### Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/464,065	12/15/99
09/464,065	Non-Provisional of	60/112,497	12/16/98

### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

### Assignee Information

Assignee name::	Chiron Corporation
Street of mailing address::	4560 Horton Street
City of mailing address::	Emeryville
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	94608-2916